City of Raleigh Utility Billing Services Account Information Update Form

Date:	Account Number:
CURRENT INFORMATION:	
Service Address:	
Name (as it appears on your Utility A	Account):
Social Security Number: (In order to comply with the FACT Act of 20 number which will be used for validating yo public record.)	Date of Birth: 003 and the Privacy Act of 2005, we request that you provide us with your social security ur identity and to prevent and mitigate ID theft/fraud. Water/sewer information is not
Driver's License Number:	State:
Spouse/Additional Contact:	
Social Security Number: (In order to comply with the FACT Act of 20 number which will be used for validating you public record.)	003 and the Privacy Act of 2005, we request that you provide us with your social security ur identity and to prevent and mitigate ID theft/fraud. Water/sewer information is not
Owner's Contact Telephone Number: ()	
INFORMATION REQUESTING TO UPDATE:	
Mailing Address:	
Telephone Number: ()	

This form can not be used to establish new service or disconnect current service. This form is to be used for account maintenance and updating account records.

Forward your completed form to our office address:

City of Raleigh Utility Billing Services PO Box 590 Raleigh, NC 27602-0590

919.890.3245 <u>UtilityBilling@raleighnc.gov</u>